

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549



FORM D

# NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D. SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

OMB Approval

3235-0076 OMB Number:

Expires: May 31, 2002 Estimated average burden hours per response...1

	SEC U	SE ONLY	
Prefix		Serial	
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Address of Principal Business Operations (Number and Street, City, State, Zip Code)  (if different from Executive Offices)  Brief Description of Business: Production and Sale of Fertilizer  Type of Business Organization  [X] corporation  [X] limited partnership, already formed  [X] limited partnership, to be formed  [X] limited partnership, limited partnersh	Name of Offering (I.) shock if the	nio io on amondment an	d nama haa sha			a shansa \	
Filing Under (Check box(es) that apply): [] Rule 504 [] Rule 505 [x] Rule 506 [] Section 4(6) [] ULOE Type of Filing: [x] New Filing [] Amendment  A. BASIC IDENTIFICATION DATA  1. Enter the information requested about the issuer  Name of Issuer ([] check if this is an amendment and name has changed, and indicate change.)  GROWMARK ACQUISITION, INC.  Address of Executive Offices (Number and Street, City, State, Zip Code)  1701 Towanda Avenue, P. O. Box 2500, Bloomington, IL 61702-2500  Address of Principal Business Operations (Number and Street, City, State, Zip Code)  (if different from Executive Offices)  Brief Description of Business: Production and Sale of Fertilizer Type of Business Organization  [X] corporation  [] limited partnership, already formed  [] other (please specify):  [] business trust  [] limited partnership, to be formed  Actual or Estimated Date of Incorporation or Organization:  [] Estimated  Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State:				ngea, ana i	indicat	e change.)	
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Composition of Business : Production and Sale of Fertilizer	1701 Towanda Avenue, P. O. Box 2500, Bloomington, IL 61702-2500 (309) 557-6294						
Brief Description of Business: Production and Sale of Fertilizer  Type of Business Organization  [X] corporation [ ] limited partnership, already formed [ ] other (please specify):  [ ] business trust [ ] limited partnership, to be formed    Month   Year	Address of Principal Business Operations (Number and Street, City, State, Zip Code)  Telephone Number (Including Area Code)						
Type of Business Organization  [X] corporation [ ] limited partnership, already formed [ ] other (please specify):  [ ] business trust [ ] limited partnership, to be formed    Month Year	(if different from Executive Offices)						
[X] corporation [ ] limited partnership, already formed [ ] other (please specify): [ ] business trust [ ] limited partnership, to be formed    Month Year	Brief Description of Business:	Production and Sale of	Fertilizer				
[ ] business trust [ ] limited partnership, to be formed    Month Year	Type of Business Organization						
Month Year  Actual or Estimated Date of Incorporation or Organization: 1 0 0 2 [x] Actual [ ] Estimated  Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State:							
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Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State:			Moi	nth `	Year		
· · · · · · · · · · · · · · · · · · ·	Actual or Estimated Date of Incorporation or Organization:  1 0 0 2 [x] Actual [ ] Estimated						
· · · · · · · · · · · · · · · · · · ·	Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State:						
CN for Canada; FN for other foreign jurisdiction) [D] [E]							

### **GENERAL INSTRUCTIONS**

#### Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

#### State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix in the notice constitutes a part of this notice and must be completed.

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> > FINANCIAL

### A. BASIC IDENTIFICATION DATA

# 2. Enter the information requested for the following:

- Each promoter of the issuer, if the issuer has been organized within the past five years;
- Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
- Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
- Each general and managing partner of partnership issuers.

Check Box(es) that Apply: [ ] Promoter [X] Beneficial Owner [ ] Executive Officer	[ ] Director	[ ] General and/or Managing Partner
Full Name (Last name first, if individual) GROWMARK, INC.		
Business or Residence Address (Number and Street, City, State, Zip Code) 1701 Towanda Avenue, P. O. Box 2500, Bloomington, IL 61702-2500		
Check Box(es) that Apply: [ ] Promoter [ ] Beneficial Owner [X] Executive Officer	[X] Director	[ ] General and/or Managing Partner
Full Name (Last name first, if individual) Davisson, William		
Business or Residence Address (Number and Street, City, State, Zip Code) 1701 Towanda Avenue, P. O. Box 2500, Bloomington, IL 61702-2500		
Check Box(es) that Apply: [ ] Promoter [ ] Beneficial Owner [X] Executive Officer	[X] Director	[ ] General and/or Managing Partner
Full Name (Last name first, if individual) Carr, R. Stephen		
Business or Residence Address (Number and Street, City, State, Zip Code) 1701 Towanda Avenue, P. O. Box 2500, Bloomington, IL 61702-2500		
Check Box(es) that Apply: [ ] Promoter [ ] Beneficial Owner [X] Executive Officer	[X] Director	[ ] General and/or Managing Partner
Full Name (Last name first, if individual) Solberg, Jeff		
Business or Residence Address (Number and Street, City, State, Zip Code) 1701 Towanda Avenue, P. O. Box 2500, Bloomington, IL 61702-2500		
Check Box(es) that Apply: [ ] Promoter [ ] Beneficial Owner [ ] Executive Officer	[X] Director	[ ] General and/or Managing Partner
Full Name (Last name first, if individual) Farmer, Dennis		
Business or Residence Address (Number and Street, City, State, Zip Code) 1701 Towanda Avenue, P. O. Box 2500, Bloomington, IL 61702-2500		
Check Box(es) that Apply: [ ] Promoter [ ] Beneficial Owner [ ] Executive Officer	[X] Director	[ ] General and/or Managing Partner
Full Name (Last name first, if individual) Barwick, Steve		
Business or Residence Address (Number and Street, City, State, Zip Code) 1701 Towanda Avenue, P. O. Box 2500, Bloomington, IL 61702-2500		
Check Box(es) that Apply: [ ] Promoter [ ] Beneficial Owner [ ] Executive Officer	[X] Director	[ ] General and/or Managing Partner
Full Name (Last name first, if individual) McGinnis, Vern		
Business or Residence Address (Number and Street, City, State, Zip Code) 1701 Towanda Avenue, P. O. Box 2500, Bloomington, IL 61702-2500		

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Check Box(es) that Apply: [ ] Promoter [ ] Beneficial Owner [ ] Executive Officer	[X] Director	[ ] General and/or Managing Partner
Full Name (Last name first, if individual) Anderson, Davis		
Business or Residence Address (Number and Street, City, State, Zip Code) 1701 Towanda Avenue, P. O. Box 2500, Bloomington, IL 61702-2500		

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	<i>**</i>				B. I	NFORM	ATION	ABOUT (	OFFERIN	IG				
	100												Yes	No
1. Ha	s the iss	suer sol	d, or do	es the is	suer inte	end to se	ell, to non	-accredit	ed inves	tors in th	is offerir	ıg?.	[]	[x]
				Answ	er also ir	n Appen	dix, Colu	mn 2, if f	iling unde	er ULOE			.,	
2. Wh	at is the	e minim	um inve					any indiv	•				\$1,000	0.00
						·		•					Yes	No
3. Do	es the c	ffering p	permit jo	oint own	ership of	a single	unit?						[]	[X]
inc sal or If r	lirectly, les of se dealer i nore tha	any cor ecurities registere an five (	mmission in the control of the contr	n or sin offering. the SEC ons to be	nilar rem If a pers and/or v	uneration to be with a start associated asso	on for sole listed is ate or stactated pe	been or licitation an associates, list ersons of	of purcha ciated pe the name	asers in rson or a e of the b	connect gent of a proker of	ion with a broker dealer.		
				f individu										
Busin	ess or F	Residen	ce Addr	ess (Nu	mber an	d Street,	, City, Sta	ate, Zip C	ode)					
 Name	of Ass	ociated	Broker o	or Deale	r									
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								cit Purch						
													[] All S	States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]		
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]		
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]		
[RI]	[SC]	[SD]	[TN]	[TX]	_[UT]_	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]		
	іапіе (L	ası nam	e 111St, 1	f individu	udi)									
Busin	ess or F	Residen	ce Addr	ess (Nu	mber an	d Street,	City, Sta	ate, Zip C	ode)					
Name	of Ass	ociated	Broker	or Deale	r									
States	s in Whi	ich Pers	on Liste	d Has S	Solicited	or Intend	ds to Soli	cit Purch	asers					
(Chec	k "All S	tates" o	r check	individu	al States	s)							[] All S	States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]		
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]		
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]		
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]		

[RI] [SC] [SD] [TN] [TX] [UT] [VT] [VA] [WA] [WV] [WI] [WY] [PR] (Use blank sheet or copy and use additional copies of this sheet as necessary.)

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1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box [ ] and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	\$	\$
	Equity	\$1,000.00	\$1,000.00
	[X] Common [ ] Preferred	•	
	Convertible Securities (including warrants)	\$	\$
	Partnership Interests	\$	\$
	Other (Specify))	\$	\$
	Total	\$1,000.00	\$1,000.00
2.	Answer also in Appendix, Column 3, if filing under ULOE. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		
		Number Investors	Aggregate Dollar Amount of Purchases
	Accredited Investors	1	\$1,000.00
	Non-accredited Investors	NONE	\$0
	Total (for filings under Rule 504 only)		\$
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1.		
	Type of offering	Type of Security	Dollar Amount Sold
	Rule 505		\$
	Regulation A		\$
	Rule 504		\$
	Total		\$
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		,
	Transfer Agent's Fees	[X]	\$0
	Printing and Engraving Costs	[X]	\$0
	Legal Fees	[X]	\$0
	Accounting Fees	[X]	\$0
	Engineering Fees	[X]	\$0
	Sales Commissions (specify finders' fees separately)	[X]	\$0
	Other Expenses (identify)	[X]	\$0
	Total	[X]	\$0
_	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AN	D USE OF PROCE	EDS

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

b. Enter the difference between the aggregate offering price given in response to Part C - Question 1 and total expenses furnished in response to Part C - Question 4.a. This difference is the "adjusted gross proceeds to the issuer."

\$1,000.00

5. Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C - Question 4.b above.

	Officers, Directors, & Affiliates	Payments To Others
Salaries and fees	[]\$	[]\$
Purchase of real estate	[]\$	[]\$
Purchase, rental or leasing and installation of machinery and equipment	[]\$	[]\$
Construction or leasing of plant buildings and facilities	[]\$	[]\$
Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger)	[]\$	[]\$
Repayment of indebtedness	[]\$	[]\$
Working capital	[]\$	[X] \$1,000.00
Other (specify):	[]\$	[]\$
	[]\$	[]\$
Column Totals	[]\$	[]\$
Total Payments Listed (column totals added)	[X] \$1,0	000.00

D. FEDERAL SIGNATURE

The issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice is filed under Rule 505, the following signature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Commission, upon written request of its staff, the information furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of Rule 502.

Issuer (Print or Type) GROWMARK ACQUISITION, INC.	Signature Davis	Date ///6/02
Name of Signer (Print or Type) William Davisson	Title of Signer (Print or Type) President	

### **ATTENTION**

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)